

Louisiana Emergency Rental Assistance Program

Request for Unit Approval

Tenant Name: _____ Bedrooms: _____

Landlord Name: _____ Telephone: _____

Landlord Address: _____

Unit Address: _____

This form should be completed by the Tenant and the Landlord to request the Louisiana Housing Corporation approval of the unit for which the Tenant has elected to receive rental assistance.

Landlord: Please read the Lease Addendum and information about Housing Quality Standards provided. After the Tenant submits this request to the Louisiana Housing Corporation, a representative will contact you to arrange for an inspection. The Louisiana Housing Corporation is not responsible for any part of the rent prior to unit approval and execution of the Rental Assistance Contract.

Tenant: With the Landlord, fill out this form completely and return it to:

2415 Quail Drive, Baton Rouge, LA 70808

Do not sign a lease until the Louisiana Housing Authority has inspected and approved the unit.

(1) **Type of Unit:** ☐ Single Family House ☐ Semi-detached/Row House
☐ Garden/Walk up ☐ Elevator/High Rise/Apartment
☐ Mobile Home Date Constructed: _____ Square Footage: _____

(2) **Current Monthly Rental Rate:** _____

Appliances and Utilities	Included in Rent (Yes or No)	Paid by Tenant (Yes or No)
Refrigerator		
Stove/Range		
Electricity		
Cooking Fuel <input type="checkbox"/> Gas <input type="checkbox"/> Electric		
Heating Fuel <input type="checkbox"/> Gas <input type="checkbox"/> Electric		
Water		
Sewer		
Garbage Collection		
Other:		

OWNER CERTIFICATION: By executing this request, the owner agrees that the required Lease Addendum is acceptable and certifies that: (1) the information provided on the form is accurate and true; (2) the proposed unit is not assisted or covered by any other federally funded rental subsidy contract; (3) the unit currently meets Housing Quality Standards (or will be brought to HQS standard before the Rental Assistance Contract is executed; and (4) this unit is made available, managed, and operated regardless of race, color, creed, religion, sex, national origin, handicap, or familial status.

Tenant Name: _____

Date: _____

Tenant Signature: _____

Landlord Name: _____

Date: _____

Landlord Signature: _____